Please type a plus sign (+) inside this b



PTO/SB/01 (12-97)

Approved for use through 9/30/00.OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB Control number.

## DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration Submitted with Initial Filing OR

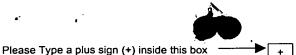
Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16(e))
required)

Attorney Docket Number	25987-701					
First Named Inventor	Islam, et al.					
COMPLE	TE IF KNOWN					
Application Number	09/679,321					
Filing Date	October 3, 2000					
Group Art Unit	2152					
Examiner Name	Not Assigned					

As a below named inventor, I hereby declare that:									
My residence, post office address, and citizenship are as stated below next to my name.									
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
PROGRAMMABLE NETWORK APPLICATION SERVER									
		(Title of the Ir	nvention)						
the specification of which is attached hereto OR									
was filed on (MM/	The state of the s								
Application Number 09/679	,321 and was	amended on (MM/DD/YYY)	Y) [[] (if applic	cable).					
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.									
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.									
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or [365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Prior Not Cla	py Attached? NO					
Number(s)	Country	(IVIIVI/DD/1111)			YES				
						⊔ 			
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto:  I hereby claim the benefit under 35 U.S.C. 119(h) of any United States provisional application(s) listed below.									
Application Number(s) Filing Date (MM/DD/YYYY)									
<b>Аррисацон Numbe</b>		i iiiig Date (MINIDDI		numb suppl	ional provisional a pers are listed on emental priority o SB/028 attached	a lata sheet			

(Page 1 of 2)

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.



**)**. .

PTO/SB/01 (12-97)

Approved for use through 9/30/00.OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## **DECLARATION** — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of the application is not designated in the prior United States or PCT international application in the manner provided by the first paragraph of 31 U.S.C. 112. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

between the filing date of the prior application and the national or PCT international filing date of this application.													
U.S. Parent Application or PCT Parent Number						Parent Filing Date F (MM/DD/YYYY)				Parent Patent Number (if applicable)			
O.O. F dient Application of For Falent Number						<del> </del>			,			<u> </u>	
		international appli											
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:    Customer Number   021971   Place Customer Number Bar Code Label here													
N	lame		Regi	stration mber		Name						egistration Number	
				····									
											<u> </u>		
Additional regist	tered pra	actitioner(s) name	d on supplem	nental Regis	tered F	Practitione	r Info	rmation	sheet f	PTO/SB/02	2C attach	ned hereto.	
Direct all correspondence to: ☐ Customer Number or Bar Code Label 021971 OR ☐ Correspondence address below													
Name	Shaal	u Mehra											
Address	Wilson	n Sonsini Goodri	ch & Rosati										
Address	650 P	age Mill Road								· · ·			
City	Palo A	Alto State CA ZIP 94304											
Country	U.S.	Telephone 650-493-9300 Fax 650-493-6811											
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.													
Name of Sole or First Inventor:    A petition has been filed for this unsigned inventor													
Given Name (first and middle (if any) Family Name or Surname								-					
	Junaid ISLAM												
Inventor's Signat	Signature Date May 1820							182001					
Residence: City San Jose State			CA		Country US		Citize	nship	CANADA				
Post Office Address 2341 Cottle Avenue													
Post Office Addre	ess											· · · · · · · · · · · · · · · · · · ·	
City		San Jose	State	CA		ZIP		951	25	Count	try	US	
	ntors ar	e being named o	on the <u>1</u> su	pplemental	Additi	onal Inve	ntor(s	s) shee	t(s) PT	O/SB/02A	attache	ed hereto:	



Type a plus sign (+) inside this box



PTO/SB/02A (3-97)
Approved for use through 9/30/98,OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## **DECLARATION**

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:				☐ A petition has been filed for this unsigned inventor							
Given Name (first and middle (if any)				Family Name or Surname							
Homayoun				VALIZADEH							
Inventor's Signature	phy	20	/						Date May 22,		
Residence: City	Danville State CA Country US							Citizensh	nip	us	
Post Office Address	109 Laurelwood Drive										
Post Office Address	ddress										
City	Danville	State	C/	<b>A</b>	ZIP		94526	Country		us	
Name of Additional Joint Inventor, if any:							been filed for	this unsig	ned	inventor	
Given Name	(first and middle (i	f any)		Family Name or Surname							
	Jeffrey S.	•		PAYNE							
Inventor's Signature	-00	-00m					Date May 18,2001				
City	Seattle	State	WA Country US				US	Citizenship		us	
Post Office Address	6247 53rd Avenu	e									
Post Office Address								·		T	
City	Seattle	State	W	WA ZIP 98115						us	
Name of Additional Joint Inventor, if any:							inventor				
Given Name (first and middle (if any)				Family Name or Surname							
Inventor's Signature								Date			
City		State			Country			Citizenship			
Post Office Address											
Post Office Address								•		· · · · · · · · · · · · · · · · · · ·	
City	State ZIP Country										

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.